

Montana Medicaid - Fee Schedule
Personal Care

Definitions:

Description – Procedure code short description. You must refer to the appropriate official CPT-4 or HCPCS coding manual for complete definitions in order to assure correct coding.

Modifier - When a modifier is present, this indicates system may have different reimbursement or code edits for that procedure code/modifier combination.

For example:

U9 = self-directed

TE = nurse supervision/oversight

TS = follow-up service

Effective – This is the first date of service for which the listed fee is applicable.

Method – Source of fee determination

Fee Schedule: Medicaid fee for listed code

PA – Prior Authorization

Y: Prior authorization is required

Space: Prior authorization is not required

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Proc	Modifier	Modifier	Description	Effective	Method	Fee	PA
A0080			Non-Emergency Transportation - per mile	7/1/2003	Fee Schedule	\$0.13	
T1019			Personal Care Services - 15 minutes	7/1/2003	Fee Schedule	\$3.45	Y
T1019	TE		Nurse Supervision Personal Care Services - 15 minutes	7/1/2003	Fee Schedule	\$3.45	
T1019	U9		Self-Directed Personal Care Services - 15 minutes	7/1/2003	Fee Schedule	\$3.16	Y
T1019	U9	TE	Self-Directed Oversight Personal Care Services - 15 minutes	7/1/2003	Fee Schedule	\$3.16	

TS modifier may be used for follow-up service for personal care and self-directed personal care. May not be used for nurse supervision or oversight.